PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

06/07/2011 7590 NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)		
(Signature)		
(Date)		

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
10/054,328	01/21/2002	Alfred A. Margaryan	RAR-5423-2	8109				
TITLE OF INVENTION: FLUOROPHOSPHATE GLASS AND METHOD FOR MAKING THEREOF								

CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorney or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							,	
EXAMINER	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
BOLDEN, ELIZABETHA 1731 501-044000 61 FC;2561 755,00 0P 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). CFR 1.364, CFR 1.363). CFR 1.364, CFR 1.364, CFR 1.363). CFR 1.364, CFR 1.363). CFR 1.364, CFR 1.364, CFR 1.363). CFR 1.364, CFR 1.364,	nonprovisional	YES	\$0	\$0	\$755	\$0	09/07/2011	
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CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" indication form pTO/SB/132) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE AFO RESEARCH, INC. Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. (payment previously—paid.) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140. (enclose an extra copy of this form). The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140. (enclose an extra copy of this form). The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140. (enclose an extra copy of this form). The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140. (enclose an extra copy of this form). Authorized Signature Michael J. Keenan/ Authorized Signature Michael J. Keenan/ Michael J. Keenan/ Authorized Signature Michael J.	BOLDEN, E	LIZABETH A	1731	501-044000	01 FC:2501		755.00 OP	
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are submitted:	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents an amember a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-paid) Payment by credit card. Form PTO-2038 is attached. (payment previously-payment previously-payment previously-payment previously-payment previously-pa			r categories (will not be pr		_	ion or other private grou	p entity Government	
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or asent or the assistance or other party interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature/Michael J. Keenan/	Issue Fee□ Publication Fee (I	No small entity discount	permitted)	A check is enclosed. Payment by credit car	rd. Form PTO-2038 is atta	ched. (payment p	reviously-paid)	
Typed or printed name Michael J. Keenan Registration No. 32,106	NOTE: The Issue Fee arinterest as shown by the	ns SMALL ENTITY state and Publication Fee (if records of the United St	us. See 37 CFR 1.27. uired) will not be accepte ates Patent and Trademark	☐ b. Applicant is no long	ger claiming SMALL EN he applicant: a registeret (97/24/2011 01 FC:2501	TITY status. See 37 CFI	R 1.27(g)(2). assistance or other party in 18854320 -755.00 OP	
	Typed or printed nan	ne <u>Michael J.</u>			Registration No.	32,106		

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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